

BEFORE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

**APPLICATION FOR TRANSPORTATION BY MOTOR
COMMON CARRIERS OF PROPERTY**

(PLEASE READ INSTRUCTIONS BEFORE PREPARING APPLICATION)

For PUC Use Only	7 DOCKETED
Docket No. _____	APPLICATION DOCKET
Folder No. _____	MAR 05 1997

RECEIVED

MAR 03 1997

BUREAU OF
TRANSPORTATION & SAFETY

ENTRY No. 72

1. David Erb Contractors, Inc.
(Full and correct name in which you intend to operate)

2. _____
(Trade name, if any)

The trade name, if fictitious, _____ been registered
(has or has not)

Secretary of the Commonwealth on _____ (attach
date-stamped registration form).

3.	<u>2930 Felton Road</u>	<u>(610) 275-6280</u>
	(Physical Address)	(Telephone No.)
	<u>Norristown</u>	<u>Montgomery PA 19401</u>
	(City) (County)	(State) (Zip)

4. _____
(Mailing Address; if different)

(City) (County) (State) (Zip)

5. _____
(Attorney's Name) (Telephone Number)

(Attorney's Address)

A-113780

**DOCUMENT
FOLDER**

6. Applicant does hold ICC authority under Docket
(does or does not)

No. MC257546

7. Applicant does not have a current safety rating
(does or does not)

issued by _____

(attach copy)

8. Approximate number of commercial vehicles to be operated

intrastate: owned 10 leased _____

9. Applicant is (check one):

Individual

Partnership. Attach copy of partnership agreement and list names and addresses of all partners below (use additional sheet if necessary).

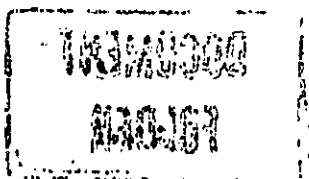
(Name)

(Address)

Corporation. Organized under the laws of the State of PA
and qualified to do business in Pennsylvania by registering
with the Secretary of the Commonwealth on June, 1981

(Attach date-stamped copy of application for Certificate of
Incorporation or Authority). Include as an attachment a list
of corporate officers and their titles and the names,
addresses and numbers of shares held by each stockholder.

David Erb, President and Secretary/Treasurer
121 North Lane
Conshohocken, PA 19428
Owns 1,000 shares



10. Attach the following, as appropriate (check those attached):

Partnership Agreement.

Date-stamped copy of Pictitious Trade Name registration certificate.

Date-stamped copy of Application for Certificate of Incorporation or Certificate of Authority.

Copy of current safety rating issued by a state or federal agency.

List of corporate officers and stockholders and distribution of shares. . . . Listed under #9.

Proof of insurance.

11. Certification .

a. Applicant certifies that it is not now engaged in any intrastate transportation of property for compensation between points in Pennsylvania and will not engage in the transportation for which approval is herein sought unless and until authorization for such transportation is received.

b. Applicant certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance may result in civil penalties, suspension or cancellation of the certificate.

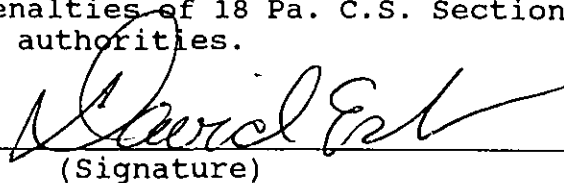
c. Applicant certifies that it understands that it is subject to an annual assessment based upon its gross intrastate operating revenue to help pay expenses incurred by the PUC in regulating motor common carriers of property; and acknowledges that failure to file the annual assessment report and timely satisfy the assessment may result in civil penalties, suspension or cancellation of the certificate.

VERIFICATION OF APPLICATION

I/We hereby state that the statements made in the application are true and correct to the best of my/our knowledge, information belief.

The undersigned understand(s) that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

David Erb
(Print Name)


(Signature)

February 21, 1997
(Date)

(Print Name)

(Signature)

(Date)

(Print Name)

(Signature)

(Date)

This section must be completed by the applicant appearing on Line 1, if an individual; by all partners, if a partnership; or by the President or Secretary if a corporation.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
2/19/97

PRODUCER
SPECHT INSURANCE GROUP, LTD.
649 N. LEWIS ROAD
ROYERSFORD, PA 19468

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY A ASSURANCE CO. OF AMERICA
- COMPANY B
- COMPANY C
- COMPANY D

INSURED
DAVID ERB CONTRACTORS, INC.
2930 FELTON ROAD
NORRISTOWN, PA 19401

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	SCP 29801199	3/19/96	3/19/97	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP. (Any one person) \$ 5,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	TDP 25193724	3/19/96	3/19/97	THE DOES NOT APPL BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
A	<input checked="" type="checkbox"/> EXCESS LIABILITY <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	TDP 25193724	3/19/96	3/19/97	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> INCL <input type="checkbox"/> EXCL THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:	TC7 86318277	4/19/96	4/19/97	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER EL-EACH ACCIDENT \$ 100,000 EL-DISEASE - POLICY LIMIT \$ 500,000 EL-DISEASE - EA EMPLOYEE \$ 100,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

SILVI CONCRETE, INC.
355 NEWBOLD ROAD
FAIRLESS HILLS, PA 19030

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

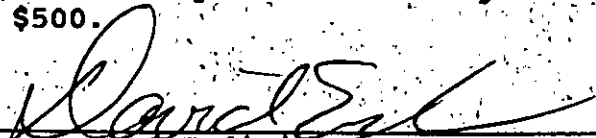
AUTHORIZED REPRESENTATIVE

Andy Eck

EXEMPTION FROM P.U.C. CARGO INSURANCE REGULATIONS

This is to advise that David Erb Contractors, Inc.
(Name of Carrier)
holding P.U.C. authority at Application Docket No. A-
is exempt from P.U.C. Cargo Insurance regulations for the following reasons:

- All Transportation will be provided in dump trucks.
- All transportation will be limited to farm products, garbage, ashes, rubbish, coal, debris, earth, crushed stone, amesite and similar construction materials.
- The value of any one load being transported will not be more than \$500.

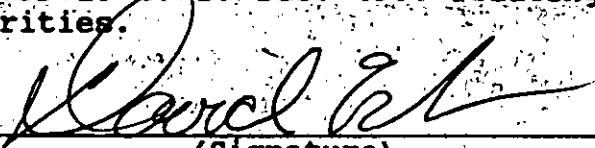


(Signature of Individual, Partner or Corporate Officer)

VERIFICATION OF STATEMENT

The undersigned deposes and says that he/she is the person who signed the Statement for the above-captioned applicant/application and that he/she is authorized to and does make this verification and the facts set forth therein are true and correct to the best of his/her knowledge, information and belief.

The undersigned understands that false statements herein are made subject to the penalties of 18 C. S. Sec. 4904 relating to unsworn falsification to authorities.

Date February 24, 1997 

(Signature)

David Erb

(Print Name)

Please return to: **PENNSYLVANIA PUBLIC UTILITY COMMISSION
BUREAU OF TRANSPORTATION AND SAFETY
INSURANCE UNIT
P. O. BOX 3265
HARRISBURG, PA 17105-3265**



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

IN REPLY PLEASE
REFER TO OUR FILE

March 14, 1997

DAVID ERB CONSTRUCTORS INC
2930 FELTON ROAD
NORRISTOWN PA 19401

In re: A-00113780 - Application of David Erb Contractors, Inc.

Dear Sir:

The above-cited application has been received and accepted for publication. It will be published in the Pennsylvania Bulletin of March 15, 1997.

You are further advised that the above-cited application will be submitted for review provided no comments are filed on or before March 31, 1997, 1997.

If comments are filed, you will be advised as to the procedure.

You are not yet authorized to provide intrastate service. You will receive notification when you may begin.

Very truly yours,

Peter S. Marzolf, Supervisor
Application Review Section
Bureau of Transportation & Safety

PSM:lg

